

45th 12/08/11

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 445141	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - BUILDING #1 B. WING _____		(X3) DATE SURVEY COMPLETED 10/18/2011
NAME OF PROVIDER OR SUPPLIER BRADLEY HEALTH CARE & REHAB			STREET ADDRESS, CITY, STATE, ZIP CODE 2910 PEERLESS RD CLEVELAND, TN 37312		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
K 062 SS=D	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5</p> <p>This STANDARD is not met as evidenced by: Based on observation, the facility failed to assure the sprinkler system is maintained.</p> <p>The findings include:</p> <p>Observation on October 18, 2011 at 8:45 a.m. revealed 6 of 26 sprinkler heads in the kitchen was not quick response heads.</p> <p>Observation on October 18, 2011 at 9:40 a.m. revealed wiring attached to the automatic sprinkler system above the ceiling at the fire doors on 400 hall.</p> <p>Observation on October 18, 2011 at 10:00 a.m. revealed wiring attached to the automatic sprinkler system above the ceiling at patient room 124 on 100 hall.</p>	K 062	<p>A. The 6 sprinkler heads in question in the dietary department are to be replaced with sprinkler heads that are in full compliance with NFPA 13 and NFPA 25.9.7.5. The wiring that was attached to the automatic sprinkler system above the ceiling on 400 hall has been removed as of 10/19/11. The sprinkler system is free of any wire attachments that are not allowed.</p> <p>The wiring that was attached to the automatic sprinkler system above the ceiling at resident room 124 on the 100 hall has been removed 10/19/11. The sprinkler system is free of any wire attachments that are not allowed.</p> <p>B. All residents have the potential to be affected by the deficiency if not corrected.</p> <p>C. Sprinkler heads to be installed and maintained in compliance with current applicable NFPA codes. Fire sprinkler system to be kept free of wiring that is not allowed to be attached to it.</p> <p>D. Environmental Services Director will monitor facility compliance.</p>		11/09/11
K 067 SS=F	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>Heating, ventilating, and air conditioning comply with the provisions of section 9.2 and are installed in accordance with the manufacturer's specifications. 19.5.2.1, 9.2, NFPA 90A, 19.5.2.2</p>	K 067			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See Instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 10/20/2011
FORM APPROVED
OMB NO. 0938-0391

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K 067	Continued From page 1 This STANDARD is not met as evidenced by: Based on observation, record review and interview the facility failed to assure the HVAC unit is maintained in accordance with the manufactures recommendations. The findings include: Observation, record review and interview with maintenance director on October 18, 2011 at 11:15 a.m. confirmed the facility failed to perform the 4-year required maintenance to the fire dampers. Based on observation, the facility failed to assure the HVAC system is maintained to ensure the safety of the staff and residents. The findings include: Observation on October 18, 2011 at 8:30 a.m. revealed no positive air flow installed in Café clean storage closet located outside the kitchen area.	K 067	A. We are in the process of servicing the fire dampers on the HVAC system to bring them into full compliance with NFPA 19.5.2.1 and NFPA 19A 19.5.2.2. On a go-forward basis the 4 year required maintenance of the fire dampers will be completed as appropriate. The café clean storage closet outside of the kitchen area has had a vent installed to provide for positive air flow to the closet (10/31/11). B. All residents have the potential to be affected by the deficiency if not corrected. C. All HVAC systems in the facility will be operated in accordance with current applicable NFPA codes and regulations. Positive air flow in required closet spaces and other areas will be maintained in full adherence to all applicable current codes. D. Environmental Services Director will monitor for compliance.	12/05/11	
K 147 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2 This STANDARD is not met as evidenced by: Based on observation, the facility failed to assure electrical wiring is installed in accordance with NFPA 70. The findings include:	K 147			

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K 147	Continued From page 2 Observation on October 18, 2011 at 9:40 a.m. revealed one (1) electrical junction box installed above the ceiling at the fire doors on wing 4 with no protected cover.	K 147	A. The electrical junction box installed above the ceiling at the fire doors on wing 4 has had a protected cover installed. B. All residents have the potential to be affected by the deficiency if not corrected. C. All electrical junction boxes in the facility will have protected covers on them as per the current NFPA code. D. Environmental Services Director will monitor for compliance.		10/19/11